

Image# 15951363563

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Mrs. Susan Brooks			2. Candidate's FEC Identification Number H2IN05082		
(b) Address (number and street) 13406 Birkenhead Street			<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Carmel IN 46032-8387			3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House		6. State & District of Candidate IN 05	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Friends of Susan Brooks		
(b) Address (number and street) 9425 N Meridian Street # 237		
(c) City, State, and ZIP Code Indianapolis IN 46260-1308		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Messer-Brooks Joint Fundraising Committee		
(b) Address (number and street) 4703 Woodway Lane NW		
(c) City, State, and ZIP Code Washington DC 20016-3240		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Mrs. Susan Brooks [Electronically Filed]	Date 05/05/2015
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES**[ADDITIONAL]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE:This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Brooks-Walorski Joint Fundraising Committee

(b) Address (number and street)

4703 Woodway Lane NW

(c) City, State and ZIP Code

Washington

DC

20016-3240

DESIGNATION OF OTHER AUTHORIZED COMMITTEES**[ADDITIONAL]**

(Including Joint Fundraising Representatives)

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NOTE:This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Brooks-Bucshon Joint Fundraising Committee

(b) Address (number and street)

4703 Woodway Lane NW

(c) City, State and ZIP Code

Washington

DC

20016-3240

DESIGNATION OF OTHER AUTHORIZED COMMITTEES**[ADDITIONAL]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

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(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code